

## Obtain a Partnership Agent ID Card and or Join the Mailing List

The **Agent ID Card** shows prospective clients (as well as prospective seminar co-sponsors) that you are a “certified Indiana Partnership” agent. It shows you have taken the necessary training required to sell Indiana Partnership policies.

The Agent ID Card will display your name, the issue date (date of completion of your 7-hour ILTCIP course), the ILTCIP logo, and a signature from an authorized ILTCIP associate.

The initial card is available **free of charge**. \*Replacement cards cost \$5 each. Check should be made payable to “Indiana Department of Insurance.”

Professionals on the **mailing list** receive various ILTCIP mailings free of charge including the Partners Update newsletter. This is an ideal method to stay current on LTC, the ILTCIP, and Indiana Medicaid.

**Instructions:** Complete the form below. If requesting an Agent ID card, fax or mail the completed form along with a **COPY OF YOUR CE CERTIFICATE** after completing the 7 Hour Partnership CE class to:

Indiana Long Term Care Insurance Partnership Program  
Indiana Department of Insurance  
311 W. Washington Street, Suite 300  
Indianapolis, IN 46204  
Fax (317) 232-5251

\_\_\_\_\_ **Please send me an Indiana Partnership Agent ID Card**

\_\_\_\_\_ Initial Card                      \_\_\_\_\_ Replacement Card\*

\_\_\_\_\_ **Please add me to the ILTCIP Mailing List**

*Please print clearly or type.*

Date \_\_\_\_\_

Name \_\_\_\_\_

Agency Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip  
Code \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Please allow 30 working days for delivery of ID Card.